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Jeri D. Vestal	(Depositor's name)
<i>Jeri D. Vestal</i>	(Signature)
May 15, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/663,962	09/16/2003	Benedikt Sas	4532680/10280 (KEM 79)	2688

TITLE OF INVENTION: BICYCLIC CARBOHYDRATES AS ANTIVIRAL BIOACTIVES FOR THE TREATMENT OF INFECTIONS CAUSED BY THE ALPHAHERPSVIRINAE HSV-1 AND HSV-2

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/05/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
CHANG, CELIA C		1625	514-456000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list

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1 Kent A. Herink

2 Daniel A. Rosenberg

3 Emily E. Harris

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Kemin Pharma Europe B.V.B.A.

Des Moines, Iowa

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Kent A. Herink

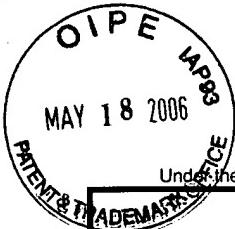
Date May 15, 2006

Typed or printed name Kent A. Herink

Registration No. 31025

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/663,962		
Filing Date	Sep 16, 2003		
First Named Inventor	Sas, Benedikt		
Art Unit	1625		
Examiner Name	Chang		
Total Number of Pages in This Submission	3	Attorney Docket Number	4532680/10280

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Fee Transmittal, Cover Sheet, Check & Return Postcard </div>
<input type="checkbox"/> Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Davis, Brown, Koehn, Shors & Roberts, P.C.		
Signature			
Printed name	Kent A. Herink		
Date	May 15, 2006	Reg. No.	31025

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Signature			
Typed or printed name	Jeri D. Vestal	Date	May 15, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial Number: 10/663,962

Confirmation Number: 2688

Title: Bicyclic Carbohydrates as Antiviral Bioactives for the Treatment of Infections Caused by the Alphaherpesvirinae HSV-1 and HSV-2

Attorney Docket Number: 4532680/10280

ISSUE FEE TRANSMITTAL LETTER

Commissioner for Patents
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Dear Sir:

Enclosed are the following:

1. Issue Fee Transmittal (PTOL-85B).
2. A check in the amount of \$1700.00 is enclosed.
3. Form PTO 2038, credit card authorization in the amount of \$_____ is enclosed.
4. A verified statement claiming small entity status is enclosed, since this application has now been assigned.
5. An amendment under 37 CFR 312.

May 15, 2006
Date

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